

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	FONDY CARTER	COURT CASE NUMBER	1:05-cv-11335
DEFENDANT	DR. NEWLAND	TYPE OF PROCESS	Summon
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
➔	Seven Medical Center		
AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
	P.O. Box 880, Ayer Massachusetts 01432		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Fondy Carter
Federal Correctional Institute
P.O. Box 6001
Ashland, KY 41005

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	1
Check for service on U.S.A.	<input checked="" type="checkbox"/>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate addresses, All Telephone Numbers, and Estimated Times Available For Service):

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Fondy Carter			26

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 32	District to Serve No. 38	Signature of Authorized USMS Deputy or Clerk Monica J. Talavera	Date 9/2/05
---	---------------------------	-------------------------------------	------------------------------------	---	-----------------------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above)	Date of Service	Time am pm
	Signature of U.S. Marshal or Deputy	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
-------------	--	----------------	---------------	------------------	--------------------------------	------------------

REMARKS: **Served by Cert Mail 9/2/05 at**

UNITED STATES DISTRICT COURT

District of MASSACHUSETTS

FONDY CARTER

V.

DR. Newland, et al

SUMMONS IN A CIVIL CASE

CASE NUMBER:

CA 05-11335-NMG

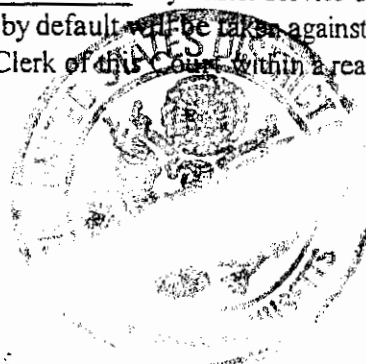
TO: (Name and address of Defendant)

DR. Newland

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Fondy Carter, Pa Se

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.



Sarah A. Thornton
CLERK

7/13/05
DATE

Hebea Greenley
(By) DEPUTY CLERK